

L06000021036

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

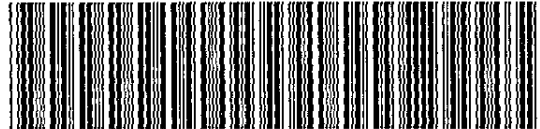
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

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FILED

2006 FEB 27 PM 12:56

06 FEB 27 PM 11:34

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA, DIVISION OF REGISTRATION

RECEIVED

## ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

## CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- BOCA VISTA HARBOR MOORINGS GROUP, LLC

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☒ Certificate of Status

### NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

### AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

### OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

### REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

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2006 FEB 27 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF  
BOCA VISTA HARBOR MOORINGS GROUP, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**FILED**  
2006 FEB 27 PM 12:56  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I — Name:**

The name of the Limited Liability Company is **Boca Vista Harbor Moorings Group, LLC.**

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the Limited Liability Company is. **13413 Gasparilla Road Unit 401, Placida, Florida 33946.**

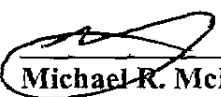
**ARTICLE III — Registered Agent & Registered Office**

The name and street address of the registered agent of the Company is **Michael R. McKinley, Esq., 21175 Olean Boulevard, Port Charlotte, FL 33952.**

**ARTICLE IV — Management:**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledge them to be my act this 23<sup>rd</sup> day of February, 2006.

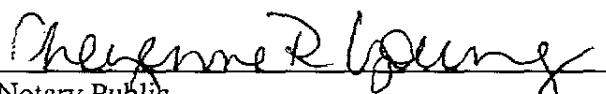
  
**Michael R. McKinley, Esq.**  
Authorized Representative of Member

STATE OF FLORIDA  
COUNTY OF CHARLOTTE

SWORN TO AND SUBSCRIBED before me this 23<sup>rd</sup> day of February, 2006, by **Michael R. McKinley, Esq.**, who is personally known to me.




**Chayenne R. Young**  
My Commission DD267680  
Expires November 16, 2007

  
Notary Public

**ACCEPTANCE OF REGISTERED AGENT**

The undersigned, being the person named in the Articles of Organization of **Boca Vista Harbor Moorings Group, LLC** as the registered agent of this limited liability company, hereby consents to accept service of process for the above stated Company at the place designated in the Articles of Organization, and accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and is familiar with and accepts the obligations of the position of registered agent.

DATED this 23<sup>rd</sup> day of February, 2006.

  
Michael R. McKinley, Esq.